FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)			Office use only
1. NAME OF COMMITTEE (in			ample: If typying, type or the lines	12FE4M5
FREEDOM PROJECT; THE				
ADDRESS (number and	424 C Stre	et NE		
X (Check if addless changed)	Başement			DC 20002 5818
		CITY	•	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRESS waskew@freedomproject.org				
COMMITTEE'S WEB PAGE ADDRESS (URL)				
www.freedomproject.org				
\ <u></u>				
COMMITTEE'S FAX NUMBER 2025439498 LLL LLL LLL LLL 2025439498				
2. DATE M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
3. FEC IDENTIFICATION NUMBER C C00305805				
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete				
Type or Print Name of Treasurer Margee Clancy				
				M " M
Signature of Treasurer Electronically Filed by Margee Clancy Date Date Date Date				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS				
Office			For further information c	ontact: FEO FORM 4
Use Only			Federal Election Commiss Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2003)